Effective October 1, 2003 PATENT APPLICATION FEE DETERMINATION RECORD RECORD												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER	THAN ENTITY
TO	OTAL CLAIMS		<i>1</i> 8		-		-	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC F	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			14 minus 20=		• 6			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		. 0			X43=		OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR.	+290=)
* If	the difference	in column 1 is	ess than zero, enter "0" in			column 2		TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II							OTHER THAN					
		(Column 1)	(Column 2) (Column 3					SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	-	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	- 18	Minus	** 1	18	=		X\$ 9=		OR	X\$18=	
	Independent	* \	Minus	***	1	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
				ī			L	TOTA	- 1	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)	4	NDDIT. FEE	<u> </u>	,	ADDII. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total ·	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AISA	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	. **		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF		-							
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE												
		ber Previously Paid					r foun	nd in thap	propriate box	in colu	ımn 1.	

Application or Docket Number